## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10019249 -1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the origin joint inventor (if plural patent is sought on the BLACK INK-JET INKS	names	are listed below) of the	y one name is listed s subject matter wh	d below) or an original, first and nich is claimed and for which a
the specification of wh	ich is at	tached hereto unless th	e following box is c	hecked:
•		as US Applic		
Number				(if applicable).
I hereby state that I h including the claims, a disclose all information	s amen	ded by any amendment	(s) referred to above	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.
Foreign Application(s) and/or	Claim of	Foreign Priority		
inventor(s) certificate listed b	elow and		ny foreign application for	any foreign application(s) for patent or r patent or inventor(s) certificate having
COUNTRY	T	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
				YES: NO:
				YES: NO:
Provisional Application I hereby claim the benefit uppelow:	nder Title	35, United States Code Sect	tion 119(e) of any Unite	d States provisional application(s) listed
		APPLICATION NUMBER	FILING DATE	· ·
information as defined in Tit	e 37, Coo or PCT int	de of Federal Regulations, Sec ernational filing date of this a	ction 1.56(a) which occu pplication:	knowledge the duty to disclose material irred between the filing date of the prior (patented/pending/abandoned)
POWER OF ATTORNEY: As a named inventor, I her business in the Patent and T			and/or agent(s) to pro	secute this application and transact all
Customer	Number	022879	Number Bar Code Label here	
Send Correspondence to	:		Direct Telepho	one Calls To:
HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400			W. Bradley Haymond	
			1 541 715 0159	
made on information a with the knowledge imprisonment, or both	and be that wi , under	lief are believed to be Ilful false statements	true; and further th and the like so m 18 of the United St	are true and that all statements at these statements were made ade are punishable by fine or tates Code and that such willful ent issued thereon.
Full Name of Inventor: Zia Rehman			Citizenship: U	S
Residence: 3	010 NE	Glacierway Corvallis, OF	97330	
Post Office Address: S	am as i	residence		
2 Guahr	w		06 19	0.3
Inventor's Signature			Date	<del>,</del>